



\$3761
#6

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Attorney Docket No.:

53394.000520

In re Application Of Bernadette GIBBS, *et al.*
Application Number 09/988,064
Filed November 16, 2001
For ABSORBENT ARTICLES HAVING IMPROVED
STRETCHABILITY
Group Art Unit 3761
Examiner J. A. Webb

RECEIVED
OCT 16 2003
TECHNOLOGY CENTER R3700

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above-identified application.

The requested extension and appropriate fee is as follows:

- | | Large Entity | Small Entity | Amount |
|---|--------------|--------------|----------|
| <input type="checkbox"/> One Month | \$ 110.00 | \$ 55.00 | \$ |
| <input checked="" type="checkbox"/> Two Month | \$ 420.00 | \$ 210.00 | \$420.00 |
| <input type="checkbox"/> Three Month | \$ 950.00 | \$ 475.00 | \$ |
| <input type="checkbox"/> Four Month | \$1480.00 | \$ 740.00 | \$ |
| <input type="checkbox"/> Five Month | \$2010.00 | \$1005.00 | \$ |
- ☐ Applicant claims small entity status. See 37 CFR 1.27.
☐ A check in the amount of the fee is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. **50-0206**. A duplicate of this sheet is attached.
- I am the ☐ applicant/inventor.
☐ assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).;
☒ attorney or agent of record.
☐ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a). _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

October 7, 2003

Date

Signature

Patrick A. Doody

Typed or Printed Name

35,022

Registration Number (if applicable)

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ form(s) is/are submitted.